POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
–	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date
Final	Original	1/2/0
✔	(1)	✔
✔	2	✔
✔	3	✔
	4	✔
	5	✔
	6	✔
	7	✔
	8	✔
	9	✔
	10	✔
	11	✔
	12	✔
	13	✔
	14	✔
	15	✔
	16	✔
	(17)	✔
	18	✔
	19	✔
	20	✔
	21	✔
	22	✔
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	24	✔
	25	✔
	26	✔
	27	✔
	28	✔
	29	✔
	30	✔
	31	✔
	32	✔
	(33)	✔
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	35	✔
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Claim		Date
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Claim		Date
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If more than 150 claims or 10 actions
staple additional sheet here

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